DISCHARGE DATE   **Section 97224**

The patient's date of discharge shall be reported in numeric form as follows: the 2-digit month, the 2-digit day, and the 4-digit year. The numeric form for days and months from 1 to 9 must have a zero as the first digit.

DISCUSSION

Format for reporting this data element on the Manual Abstract Reporting Form for discharges occurring on or after January 1, 1999:

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9. DISCHARGE DATE
┌────┬────┬────┬────┬────┬────┬────┬────┐
│    │    │    │    │    │    │    │    │
└────┴────┴────┴────┴────┴────┴────┴────┘
    Month      Day        Year (4-Digit)
```

Critical Data Element: If the reported discharge date is blank, outside the report period, or invalid (such as June 31) and is not corrected by the hospital after it is identified by OSHPD as an error, the entire discharge data record will be deleted.

Four Digit Year: Hospital medical record systems are expected to be Year 2000 (Y2K) compliant for discharges on or after January 1, 1999

Reporting Requirements:

● The actual date of discharge from inpatient care (or transfer to another TOC) must be reported, even if the length of stay is over 365 days.

● If the patient is discharged on February 5, 2000, the reported value is 02052000.

Discharge/Transfer: A separate episode of inpatient care (a discharge) is to be reported when a patient is transferred between hospitals or within a hospital between Types of Care. If the patient is transferred from one TOC to another (e.g., from acute care to skilled nursing/intermediate care), the discharge date for the acute care discharge data record would be the date the patient was transferred to skilled nursing/intermediate care.

One Day Stays (Same Day): One day stays include patients admitted and discharged on the same day. Such patients are formally admitted (expected to remain overnight or longer) but are discharged on the day of admission. A discharge data record must be reported to OSHPD. Skilled Nursing Bed Hold Days: Skilled nursing **bed hold days are not reported** to OSHPD. A patient cannot be in two levels of care at the same time.